		U.S. DEPARTMENT OF	F COMMERCE PATENT &								
orm P	TO 139	90		CUS.	TOMER NUMBER: 32256						
(REV (TRANSMITTAL LETTI	ER TO THE UNITED STATES ED OFFICE (DO/EO/US) NG UNDER 35 U.S.C. §371		Attorney's Docket Number 358275.30008						
					U.S. 1000/57777375						
		nal Application Number P2004/016088	International Filing Date 29 October 2004		Priority Date Claimed 29 October 2003						
Fι		US HAVING ACTIVITY OF CO	ONTROLLING DISEASE OF GR ONTROLLING AND BIOLOGICA		OUS PLANT, CONTROLLING AGENT TERIAL						
1. 2.	⊠ □	This is a FIRST submission of items concerning a filing under 35 U.S.C. §371.									
3.		This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. §371. This is an express request to begin national examination procedures (35 U.S.C. §371(f)). The submission must include									
4.	8	items (5), (6), (9) and (21) indicated below. The US has been elected (Article 31).									
5.	×	A copy of the International Application as filed (35 U.S.C. §371(c)(2))									
	a.										
	b. has been communicated by the International Bureau.										
	c.	is not required, as the applica	ation was filed in the United States Ro	ceiving	Office (RO/US).						
6.	Ø										
	a.										
7.	b. ⊠	has been previously submitted under 35 U.S.C. 154(d)(4). Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. §371(c)(3))									
	a.	are attached hereto (required only if not communicated by the International Bureau).									
	b.	 b. □ have been communicated by the International Bureau. c. □ have not been made; however, the time limit for making such amendments has NOT expired. 									
	c.										
	d.	■ have not been made and will	not be made.								
8.		An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. §371(c)(3)).									
9.	O	An executed oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).									
10.		An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. §371(c)(5)).									
Iter	ns 11	to 20 below concern other docum	· · · · · · · · · · · · · · · · · · ·								
11.			nent under 37 C.F.R. §§1.97 and 1.98								
12.		included.	rding. A separate cover sheet in com	pliance v	with 37 C.F.R. §§3.28 and 3.31 is						
13.		A preliminary amendment.									
14.		An Application Data Sheet under 37 C.F.R. §1.76.									
15.		A substitute specification.									
16.		A power of attorney and/or address letter.									
17.		A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 35 U.S.C, 1.821-1.825 A second copy of the published international application under 35 U.S.C. 154(d)(4).									
18	_		• •	=							
19		□ A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).									
(2) (3) (4) (5)	Copy Engl PCT PCT PCT	ish translation of International Sear Request; /IB/306; Demand;	ition (WO2005/040358A1) with Inter ch Report;	national	Search Report;						
(6)	Forn	n PCT/IB/301;									

- (7) Form PCT/IB/304;
- (8) Form PCT/IB/308 (first and second and supplementary notice)
- (9) IPE Report (PCT/IPEA/409)
- (10) English translation of Amended Claims under Article 34;
 (11) English translation of Receipt of Deposit (FERM BP-08515, FERM BP-08516 and FERM BP-08517).

[11] English translation of receipt of Deposit (FERM BF-U8313, FERMI BF-U8314).

This collection of information is required by 37 CFR 1.414 and 1.491-1.492. The information is required to obtain or retain a benefit by the public, which is to file (and by the USPTO to process) an application. Confidentiality is governed by 38 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 15 minutes to complete, including gathering information, preparing, and submitting the completed form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Applicant use Applicant us		(if known, see 37 CFR 1.5)	IN P	TERNATIONAL APPLICATION NO).	ATTORNEY'S DOCKET NUMBER 358275.30008						
Basic national fee \$300.00 \$300.00 \$20	1017	,,,,,				Applicant use	Office use only					
### Stammation fee \$300.00 \$200.00 \$200.00 \$500.00 ### Sty Examination fee \$300.00 \$500.00 \$500.00 ### TOTAL OF ABOVE CALCULATIONS = \$1,000.00 \$1,000.00 ### Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$329 for each additional 50 or fraction thereof (cound up cash of the paper of the paper of reach of the paper of t												
8c) Search fee	′				\$300.00	\$300.00						
TOTAL OF ABOVE CALCULATIONS = \$1,000.00 Additional fee for specification and drawing filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 or fraction thereof (round up to a whole number) of each additional 50 or fraction thereof (round up to a whole number). RATE to a whole number) RATE to a whole numbers RATE to a whole number) RATE to a whole numbers RATE to a who		fee			\$200.00	\$200.00						
□ Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$1250 for each additional 50 sheets of paper or fraction thereof Total Sheets Extra Sheets Number of each additional 50 or fraction thereof fround up to a whole number) X \$250.00 S0.00 Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 C.F.R. §1.492(b)). S0.00 CLAIMS NUMBER FILED NUMBER EXTRA RATE Total Claims 20-20 0 x \$50.00 \$0.00 Independent Claims 11-3 8 x \$200.00 \$1,600.00 Multiple Dependant Claims (if applicable) + 360.00 \$0.00 □ Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2 \$0.00 □ Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2 \$0.00 □ Processing fee of \$130.00 for furnishing the English translation later than 30 \$0.00 ■ Processing fee of \$130.00 for furnishing the English translation later than 30 \$0.00 ■ Processing fee of \$130.00 for furnishing the English translation later than 30 \$0.00 ■ TOTAL NATIONAL FEE \$0.00 ■ Processing fee of \$130.00 for furnishing the English translation later than 30 \$0.00 ■ TOTAL NATIONAL FEE \$0.00 ■ Amount to be charged to a proper of the enclosed assignment (37 C.F.R. §1 32(ft)). The assignment must be accompanied by an appropriate cover sheet (37 C.F.R. §8 328, 331). ■ A check in the amount of \$2.600.00 to cover the above fees is enclosed. ■ Please charge my Deposit Account Number 50.0622 in the amount of \$0.000 ■ Processing fee of the short of the proper of the sho	⊠c) Search fee		\$500.00									
sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for read additional 50 yets of pager of fraction thereof or faction or faction thereof or faction thereof or faction or faction or faction thereof or faction faction or faction or faction or faction faction or faction or faction	TOTAL OF ABO	OVE CALCULAT	\$1,000.00									
Total Sheets Extra Sheets or fraction thereof (round up to a whole number) to a whole number to a whole number) to a whole number to a whole number to a whole number) to a whole number to a whole	sequence listing	g or computer program										
Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 C.F.R. §1.492(e)). CLAIMS NUMBER FILED NUMBER EXTRA RATE TOTAL CLAIMS 20-20 0 x \$50.00 \$50.00 Independent Claims 11-3 8 x \$200.00 \$1,600.00 Multiple Dependant Claims (if applicable) TOTAL OF ABOVE CALCULATIONS = \$2,600.00 Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2 SUBTOTAL = \$0.00 Frocessing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 C.F.R. §1.492(f)). TOTAL NATIONAL FEE = \$0.00 Fee for recording the enclosed assignment (37 C.F.R. §1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 C.F.R. §8 3.28, 3.31). \$40.00 per property TOTAL FEES ENCLOSED = \$2,600.00 Amount to be Refunded: Amount to be charged Amount to be charged Amount to be charged Amount to be charged TOTAL SEES ENCLOSED = \$2,600.00 TOTAL SEES ENCLOSED = \$2,600.00 Amount to be charged TOTAL SEES ENCLOSED = \$2,600.00 TOTAL SEES ENCLOSED = \$2,600.00 Amount to be charged TOTAL SEES ENCLOSED = \$2,600.00 Amount to be charged TOTAL SEES ENCLOSED = \$2,600.00 TOTAL SEES ENCLOSED = \$2,600.00 Amount to be charged Amount to be charged to a credit and work fees is enclosed. Amount to be charged to a credit and work fees is enclosed. Amount to be charged to a credit and work fees is enclosed. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account Number 50 0622. A duplicate copy of this sheet is enclosed. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account Number 50 0622. A duplicate copy of this sheet is enclosed. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account Number 50 0622. A duplicate copy of			or fraction thereof (round up RATE									
From the earliest claimed priority date (37 C.F.R. §1.492(e)). CLAIMS NUMBER FILED NUMBER EXTRA RATE Total Claims 20-20 0 x\$50.00 \$0.00 Independent Claims 11-3 8 x\$200.00 \$1,600.00 Multiple Dependant Claims (if applicable) TOTAL OF ABOVE CALCULATIONS = \$2,600.00 Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2 SUBTOTAL = \$0.00 Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 C.F.R. §1.492(f)). TOTAL NATIONAL FEE = \$0.00 Fee for recording the enclosed assignment (37 C.F.R. §1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 C.F.R. §8.3.28, 3.31). \$40.00 per property TOTAL FEES ENCLOSED = \$2,600.00 Amount to be charged Amount to be charged Amount to be charged Please charge my Deposit Account Number 50-0622 in the amount of \$2,600.00 The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account Number 50 0622. A duplicate copy of this sheet is enclosed. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account Number 50 0622. A duplicate copy of this sheet is enclosed. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account Number 50 0622. A duplicate copy of this sheet is enclosed. Respontfully submitted. Where an appropriate time limit under 37 C.F.R. §1.495 has not been met, a petition to revive (37 C.F.R. §1.137(a) or (b)) must be filed and granted to restore the application to pending status. Respontfully submitted. Mark [R. Shanks Registration Number 33,781] REED SMITH LLP 3110 Fairview Park Drive	20 - 100=	0/50 =		0	x \$250.00	\$0.00						
Total Claims 20-20 0 x \$50.00 \$0.00 Independent Claims 11-3 8 x \$200.00 \$1,600.00 Multiple Dependant Claims (if applicable) + 360.00 \$0.00 TOTAL OF ABOVE CALCULATIONS = \$2,600.00 Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2 \$0.00 Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 C.FR. §1.492(f)). \$0.00 TOTAL NATIONAL FEE = \$0.00 Fee for recording the enclosed assignment (37 C.FR. §1.492(f)). The assignment must be accompanied by an appropriate cover sheet (37 C.FR. §8 3.28, 3.31). \$0.00 TOTAL FEES ENCLOSED = \$2,600.00 Amount to be Refunded: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 C.F.R. \$1.492(e)).											
Total Claims 20-20 0 x \$50.00 \$0.00 Independent Claims 11-3 8 x \$200.00 \$1,600.00 Multiple Dependant Claims (if applicable) + 360.00 \$0.00 TOTAL OF ABOVE CALCULATIONS = \$2,600.00 Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2 \$0.00 Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 C.FR. §1.492(f)). \$0.00 TOTAL NATIONAL FEE = \$0.00 Fee for recording the enclosed assignment (37 C.FR. §1.492(f)). The assignment must be accompanied by an appropriate cover sheet (37 C.FR. §8 3.28, 3.31). \$0.00 TOTAL FEES ENCLOSED = \$2,600.00 Amount to be Refunded: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	CLAIMS	Number	FILED	Number Extra	RATE							
Independent Claims 11-3 8 x \$200.00 \$1,600.00 Multiple Dependant Claims (if applicable)						\$0.00						
TOTAL OF ABOVE CALCULATIONS = \$2,600.00 Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2 SUBTOTAL = \$0.00 Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 C.F.R. §1.492(f)). TOTAL NATIONAL FEE = \$0.00 Fee for recording the enclosed assignment (37 C.F.R. §1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 C.F.R. §§ 3.28, 3.31). \$40.00 per property TOTAL FEES ENCLOSED = \$2,600.00 Amount to be Refunded: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Independent Clair	ms 11-3	}	8	x \$200.00	\$1,600.00						
TOTAL OF ABOVE CALCULATIONS = \$2,600.00 Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2 SUBTOTAL = \$0.00 Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 C.F.R. §1.492(f)). TOTAL NATIONAL FEE = \$0.00 Fee for recording the enclosed assignment (37 C.F.R. § 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 C.F.R. §§ 3.28, 3.31). \$40.00 per property TOTAL FEES ENCLOSED = \$2,600.00 Amount to be Refunded: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Multiple Dependa	ant Claims (if appli	cable)		+ 360.00	\$0.00						
Subtotal			TOTA	L OF ABOVE CALCUI	ATIONS =	\$2,600.00						
Processing fee of \$130.00 for furnishing the English translation later than 30 . months from the earliest claimed priority date (37 C.F.R. §1.492(f)). **TOTAL NATIONAL FEE = \$0.00 Fee for recording the enclosed assignment (37 C.F.R. § 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 C.F.R. §§ 3.28, 3.31). \$40.00 per property **TOTAL FEES ENCLOSED = \$2,600.00 **Amount to be Refunded: Amount to be charged \$\$ **Amount to be charged \$\$\$ **A. A check in the amount of \$2,600.00 to cover the above fees is enclosed. **D. Please charge my Deposit Account Number 50-0622 in the amount of \$\$\$			is. See :	37 CFR 1.27. The fees in	dicated	\$0.00						
months from the earliest claimed priority date (37 C.F.R. §1.492(f)). TOTAL NATIONAL FEE = \$0.00 Fee for recording the enclosed assignment (37 C.F.R. § 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 C.F.R. §§ 3.28, 3.31). \$40.00 per property TOTAL FEES ENCLOSED = \$2,600.00 Amount to be Refunded: Amount to be charged \$ \$ Amount to be charged \$ \$ A check in the amount of \$2,600.00 to cover the above fees is enclosed. Please charge my Deposit Account Number 50-0622 in the amount of \$ to cover the above fees. A duplicate copy of this sheet is enclosed. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account Number 50 0622. A duplicate copy of this sheet is enclosed. Pees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. Note: Where an appropriate time limit under 37 C.F.R. §1.495 has not been met, a petition to revive (37 C.F.R. §1.137(a) or (b)) must be filed and granted to restore the application to pending status. REED SMITH LLP 3110 Fairview Park Drive Suite 1400 Falls Church, VA 22042				SUI	BTOTAL =	\$0.00						
Fee for recording the enclosed assignment (37 C.F.R. § 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 C.F.R. §§ 3.28, 3.31). \$40.00 per property TOTAL FEES ENCLOSED = \$2,600.00 Amount to be Refunded: \$ Amount to be Refunded: \$ Amount to be charged \$ \$ a. A check in the amount of \$2,600.00 to cover the above fees is enclosed. b. Please charge my Deposit Account Number 50-0622 in the amount of \$			\$0.00									
must be accompanied by an appropriate cover sheet (37 C.F.R. §§ 3.28, 3.31). \$40.00 per property TOTAL FEES ENCLOSED = \$2,600.00 Amount to be Refunded:				TOTAL NATION	NAL FEE =	\$0.00						
TOTAL FEES ENCLOSED = \$2,600.00 Amount to be Refunded:	must be accompa	nied by an appropr										
Amount to be Refunded: Amount to be charged a. A check in the amount of \$2,600.00 to cover the above fees is enclosed. b. Please charge my Deposit Account Number 50-0622 in the amount of \$	\$40.00 per proper	rty		TOTAL EDGG ENG	TI OCED							
a. A check in the amount of \$2,600.00 to cover the above fees is enclosed. Belease charge my Deposit Account Number 50-0622 in the amount of \$				TOTAL FEES ENG	CLOSED =	\$2,600.00						
a. A check in the amount of \$2,600.00 to cover the above fees is enclosed. b. □ Please charge my Deposit Account Number 50-0622 in the amount of \$							-					
b. □ Please charge my Deposit Account Number 50-0622 in the amount of \$ to cover the above fees. A duplicate copy of this sheet is enclosed. c. ☑ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account Number 50 0622. A duplicate copy of this sheet is enclosed. d. □ Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. Note: Where an appropriate time limit under 37 C.F.R. §1.495 has not been met, a petition to revive (37 C.F.R. §1.137(a) or (b)) must be filed and granted to restore the application to pending status. Respectfully submitted. Mark [R. Shanks Registration Number 33,781] REED SMITH LLP 3110 Fairview Park Drive Suite 1400 Falls Church, VA 22042							\$					
information should not be included on this form. Provide credit card information and authorization on PTO-2038. Note: Where an appropriate time limit under 37 C.F.R. §1.495 has not been met, a petition to revive (37 C.F.R. §1.137(a) or (b)) must be filed and granted to restore the application to pending status. Respectfully submitted. Mark R. Shanks Registration Number 33,781 REED SMITH LLP 3110 Fairview Park Drive Suite 1400 Falls Church, VA 22042	 b. □ Please charge my Deposit Account Number 50-0622 in the amount of \$ to cover the above fees. A duplicate copy of this sheet is enclosed. c. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account Number 50 0622. A duplicate copy of this sheet is enclosed. 											
or (b)) must be filed and granted to restore the application to pending status. Respectfully submitted, Mark R. Shanks Registration Number 33,781 REED SMITH LLP 3110 Fairview Park Drive Suite 1400 Falls Church, VA 22042												
Mark R. Shanks Registration Number 33,781 REED SMITH LLP 3110 Fairview Park Drive Suite 1400 Falls Church, VA 22042												
3110 Fairview Park Drive Suite 1400 Falls Church, VA 22042	Mark R. Shanks											
Suite 1400 Falls Church, VA 22042												
Falls Church, VA 22042												
·												